

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	71		06/12/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	CV	703	05-08-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date
Final	Original
1	1/22/01
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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9	✓
10	✓
11	✓
12	N
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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